

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         | MW       |        | 05-07-01 |
| O.I.P.E. CLASSIFIER       |          |        |          |
| FORMALITY REVIEW          | P.       | JC872  | 06-29-01 |
| RESPONSE FORMALITY REVIEW |          |        |          |

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim             | Date  |
|-------------------|-------|
| Final<br>Original |       |
| 1                 | 7/02  |
| 2                 | 8/02  |
| 3                 | 4/03  |
| 4                 | 10/03 |
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| Claim             | Date |
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| Claim             | Date |
|-------------------|------|
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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06/29/04